

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	MD		9.15.01
O.I.P.E. CLASSIFIER	✓	3	9/11
FORMALITY REVIEW	MD	1121	10-3-2001
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
 staple additional sheet here

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